Page 1 of 1

## Florida Department of State

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### COR AMND/RESTATE/CORRECT OR O/D RESIGN J M S EQUIPMENT NURSERY CORP

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#### Articles of Amendment to Articles of Incorporation of

#### JMS EQUIPMENT NURSERY CORP

abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation mame must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ew the
(Document Number of Corporation (If known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the amendment(s) to its Articles of Incorporation:  A. If amending nome, enter the new pame of the corporation:  J.M.S. EQUIPMENT & NURSERY, CORP.  The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MIST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAX BE A POST OFFICE BOX)	ew the ion
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AT AND TO A LOCAL COMMENTS OF THE STATE OF T	
Name of New Registered Agent:	
New Registered Office Address: (Florida street address)	
(City) (Zip Cods)	
(Lip Com)	
New Registered Agent's Signature, if changing Registered Agent:	_
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position	7.

Page 1 of 3

Signature of New Registered Agent, if changing

# If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Anach additional sheets, if necessary) Title Name Address Type of Act

	<u>Name</u>	<u>Address</u>	Type of Action
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F. <u>Kan</u> a	mendment provides for as	exchange, reclassification, or cancells	tion of issued shares.
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The date of each amendmen	t(s) adoption: AUGUST 26, 2011
Effective date <u>if applicable</u> :	AUGUST 25, 2011  August 25, 2011
,	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	are adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	,77
	(voting group)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated AUG	SUST 25, 2011
Signature	two il senter
sele	a director, president or other officer — if directors or officers have not been cted, by an incorporator — if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	JUAN MIGUEL SANTOS
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)